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## BIB DATA SHEET

CONFIRMATION NO. 8451

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/620,806	07/17/2003	436	1641	50229-378		
<b>RULE</b>						
<b>APPLICANTS</b> Sylvia Daunert, Lexington, KY; Michael Poon, New York, NY; Urvee Desai, San Francisco, CA; Sapna K. Deo, Lexington, KY;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/396,122 07/17/2002						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 10/20/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JAMES L GRUN/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> KY	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> MCDERMOTT, WILL & EMERY 600 13th Street, N.W. Washington, DC 20005-3096 UNITED STATES						
<b>TITLE</b> Method and kit for determination of prostacyclin in plasma						
<b>FILING FEE RECEIVED</b> 604	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		